

| POSITION | INITIALS | ID NO. | DATE |
|---------------------------|----------|--------|----------|
| FEE DETERMINATION | | | |
| O.I.P.E. CLASSIFIER | | 21 | 11/6/01 |
| FORMALITY REVIEW | KE | 705 | 11/16/01 |
| RESPONSE FORMALITY REVIEW | HS | 866 | 04-08-02 |

INDEX OF CLAIMS

✓ Rejected N Non-elected
 = Allowed I Interference
 - (Through numeral) ... Canceled A Appeal
 + Restricted O Objected

| Claim | Date |
|----------|------|
| Original | |
| Final | |
| 1 | ✓ |
| 2 | ✓ |
| 3 | ✓ |
| 4 | ✓ |
| 5 | ✓ |
| 6 | ✓ |
| 7 | ✓ |
| 8 | ✓ |
| 9 | ✓ |
| 10 | ✓ |
| 11 | ✓ |
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| 46 | ✓ |
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| 49 | ✓ |
| 50 | ✓ |

| Claim | Date |
|----------|------|
| Original | |
| Final | |
| 51 | ✓ |
| 52 | ✓ |
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| Claim | Date |
|----------|------|
| Original | |
| Final | |
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| 143 | ✓ |
| 144 | ✓ |
| 145 | ✓ |
| 146 | ✓ |
| 147 | ✓ |
| 148 | ✓ |
| 149 | ✓ |
| 150 | ✓ |

BEST AVAILABLE COPY

If more than 150 claims or 10 actions
staple additional sheet here

(LEFT INSIDE)

15545
 1/19/01
 IC-571
 04/08/02